

12/3/02
PATENT

Attorney Docket No. MTI-31532

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Weimer, Ronald A.
Serial No. : 09/941,827
Filing Date : August 29, 2001
For : Method of Improved High K Dielectric-Polysilicon Interface for CMOS Devices
Examiner : HUYNH, Yennhu B.
Group Art Unit : 2813
Confirmation No. : 7551

CERTIFICATION UNDER 37 CFR 1.8(a) and 1.10

I hereby certify that, on the date shown below, this correspondence is being:

Mailing

☒ deposited with the United States Postal Service in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231

37 CFR 1.8(a)

37 CFR 1.10

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Transmission

☐ transmitted by facsimile to Fax No _____ addressed to Examiner _____ at the U.S. Patent and Trademark Office.

Date: 12-3-02

Antonia J. O'Leary

Assistant Commissioner for Patents
Washington, D.C. 20231

TRANSMITTAL

1. Transmitted herewith is:

- Response to Restriction and Preliminary Amendment
- Replacement Claims (26 sheets)
- Blacklined Claims (26 sheets)
- Supplemental Information Disclosure Statement
- Form 1449
- Copy of cited references
- Return Postcard

STATUS

2. Applicant is a large entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.
- ☒ Applicant believes that no extension of term is required. However, if an extension of time is required, please consider this a petition therefor.
- ☐ Applicant petitions for an extension of time under 37 C.F.R. 1.136 for the total number of months checked below [fees: 37 C.F.R. 1.17(a)(1)-(4)] :

Extension (months)	Fee for other than <u>small entity</u>	Fee for <u>small entity</u>
<input type="checkbox"/> one month	\$ 110.00	\$ 55.00
<input type="checkbox"/> two months	\$ 390.00	\$ 195.00
<input type="checkbox"/> three months	\$ 890.00	\$ 445.00
<input type="checkbox"/> four months	\$ 1,390.00	\$ 695.00
	Fee: <u>\$0.00</u>	

If an additional extension of time is required, please consider this a petition therefor.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

Claims Remaining After Amendment		Highest No. Previously Paid For		Rate (Small Entity)	Additional Fee or	Rate (Large Entity)	Additional Fee
Total 134	Minus	95	=	x 9= \$	\$	39 x 18	\$702.00
Independent 51	Minus	49	=	x 42= \$	\$	2 x 84	\$168.00

FIRST PRESENTATION OF MULTIPLE DEP CLAIM

TOTAL
ADDIT. Fee \$

or TOTAL
ADDIT. Fee \$870.00

- c. ☐ No additional fee for claims is required.
- d. ☒ Total additional fee for claims required \$870.00

FEE DEFICIENCY

5. ☒ If any additional extension and/or fee is required, charge Account No. 23-2053.
- ☒ If any additional fee for claims is required, charge Account No. 23-2053.

Date: December 3, 2002

Kristine M Strodthoff
Kristine M. Strodthoff, Reg. No. 34,259

Whyte Hirschboeck Dudek S.C.
111 East Wisconsin Avenue
Suite 2100
Milwaukee, WI 53202
(414) 273-2100
Customer No. 31870

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